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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing  
OR  
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 46522 - 1101

First Named Inventor DOMMER, Gary

**COMPLETE IF KNOWN**

Application Number 10 / 085,489

Filing Date 02/26/2002

Art Unit 2673

Examiner Name

**As the below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

REPRESENTATION OF EPG PROGRAMMING INFORMATION

*(Title of the Invention)*

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 02/26/2002 as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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**DECLARATION — Utility or Design Patent Application**Direct all correspondence to: ☐ Customer Number  OR ☒ Correspondence address below

Greg P. Silberman  
**Name** U.S.P.T.O. Reg. No. 39,836

Kaye Scholer LLP  
**Address** 425 Park Avenue

**City** New York

**State** New York

**ZIP** 10022

**Country** US

**Telephone** (212) 836 - 8773

**Fax** (212) 836 - 6703

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR :** ☒ A petition has been filed for this unsigned inventor

**Given Name**  
 (first and middle [if any]) Gary

**Family Name**  
 or Surname Dommer

**Inventor's**  
**Signature**

**Date** 8-15-02

**Residence: City** Pompano Beach

**State** FL

**Country** US

**Citizenship** US

**Mailing Address** 1000 South Ocean Boulevard

**City** Pompano Beach

**State** FL

**ZIP** 33062

**Country** US

**NAME OF SECOND INVENTOR:** ☐ A petition has been filed for this unsigned inventor

**Given Name**  
 (first and middle [if any]) Anders B.

**Family Name**  
 or Surname Rorholt

**Inventor's**  
**Signature**

**Date**

**Residence: City** Delray Beach

**State** FL

**Country** US

**Citizenship** NO

**Mailing Address** 314 SE 1st Avenue

**City** Delray Beach

**State** FL

**ZIP** 33444

**Country** US

☐ Additional inventors are being named on the \_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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 (first and middle [if any]) Gary

**Family Name**  
 or Surname Dommer

**Inventor's**  
**Signature**

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Please type a plus sign (+) inside this box → ☐

PTO/SB/81 (02-01)

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## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/085,489
Filing Date	02/26/2002
First Named Inventor	DOMMER, Gary
Title	REPRESENTATION OF EPG PROGRAMMING INFORMATION
Group Art Unit	2673
Examiner Name	
Attorney Docket Number	46522 - 1101

I hereby appoint:

☐ Practitioners at Customer Number  → 

Place Customer  
Number Bar Code  
Label here

  
**OR**

☒ Practitioner(s) named below:

Name	Registration Number
Gregory Silberman	39,836
Robert Greenfeld	41,802
Betty A. Ryberg	42,119
Alex Yip	34,759

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

**OR**

☐ Practitioners at Customer Number  → 

Place Customer  
Number Bar Code  
Label here

**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	Greg P. Silberman				
Address	Kaye Scholer LLP				
Address	425 Park Avenue				
City	New York	State	New York	Zip	10022
Country	United States				
Telephone	(212) 836 - 8773	Fax	(212) 836 - 6703		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*

### SIGNATURE of Applicant or Assignee of Record

Name	Anders B. Rorholt
Signature	
Date	8/15 - 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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PTO/SB/81 (02-01)

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Name	Gary Dommer
Signature	
Date	8-15-02

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